OB DOGN 5/045/035	6/30/99	
SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4. Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested. 1. Show to whom delivered, date, and addressee's address. 2. Restricted Delivery (Extra charge)		
3. Article Addressed to: THOMAS WAITE / BOB HUGHES	4. Article Number P 074 976 731	
YANKEE GOLD & SILVER CO 677 COUNTRY CLUB DR STANSBURY PARK UT 84074	Type of Service: Registered Insured COD Express Mail Return Receipt for Merchandise	
	Always obtain signature of addressee or agent and DATE DELIVERED.	
5. Signature – Address X 6. Signature – Agent X 7. Date of Delivery 7. Date of Delivery	8. Addressee's Address (ONLY if requested and fee paid)	
PS Form 3811, Mar. 1988 * U.S.G.P.O. 1988-212-865 DOMESTIC RETURN RECEIPT		

C/01E/02E

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DOOM

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

Complete items 1, 2, 3, and 4 on the raversa.

Attach to front of article if space permits, otherwise affix to back of article.

· Endorse article "Return Receipt Requested" adjacent to number.



RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

DIVISION OF OIL, GAS & MINING 1594 W NORTH TEMPLE STE 1210 BOX 145801

SALT LAKE CITY UT 84114-5801

P 074 976 731

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED NOT FOR INTERNATIONAL MAIL

(See Reverse)

Sent THOMAS WAITE/BOB HUGHES YANKEE COLD & SILVER CO		
677 COUNTRY CLUE P.O., State and ZIP Code STANSBURY PARK U		42
Postage	S	S S S
Certified Fee		
Special Delivery Fee		S
Restricted Delivery Fee		S/045/035
Return Receipt showing to whom and Date Delivered		/03
Return Receipt showing to whom. Date, and Address of Delivery CIT	Un	01
TOTAL Postage and Fees Office	\$	6
Postmark or Date	1999	6/30/99